

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>me</i>		07/16/01
O.I.P.E. CLASSIFIER	<i>DN</i>	32	7/23
FORMALITY REVIEW	<i>JP</i>	1029	08/27/02
RESPONSE FORMALITY REVIEW	<i>HL</i>	10701	02/01/02

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final	
Original	
1	✓
2	✓
3	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
 staple additional sheet here

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530
 08-27-01
 617-0-01